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PTO/SB/21 (12-07)

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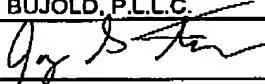
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/584,975
	Confirmation Number	
	Filing Date	with an effective filing date of December 11, 2004
	First Named Inventor	Klaus STEINHAUSER, Christian POPP and Peter SCHIELE
	Group Art Unit	3655
	Examiner Name	Derek Douglas Knight Fax: (571) 273-8300
Total No. of Pages in this Submission: 11	Attorney Docket Number	ZAHFRI P868US

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> (In Duplicate) <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Amendment/Response [10] <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> (In Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> <input type="checkbox"/> Certified Copy of Priority <input type="checkbox"/> Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers <input type="checkbox"/> (for an Application) <input type="checkbox"/> Drawing(s) --Annotated Sheet(s) <input type="checkbox"/> Replacement Sheet(s) <input type="checkbox"/> New Sheet(s) <input type="checkbox"/> <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> <input type="checkbox"/> Request for Refund <input type="checkbox"/>	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> <input type="checkbox"/> Status Letter <input type="checkbox"/> <input type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/>
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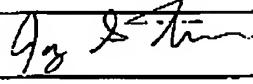
REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Jay S. Franklin DAVIS & BUJOLD, P.L.L.C.	Reg. No. 54,105 CUSTOMER NO. 020210
Signature		
Date	September 29, 2010	

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on September 29, 2010.

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